FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT • TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A94000000529

SECRETARY OF STATE DIVISION OF CORPORATIONS

97 OCT -6 AMII: 11



	7070000002		98) 18 18 18 18 18 18 3
ESTUMKEDA, LTD.	†		6471 8711 8811 8811 8811 8811 813 813 813 813 8
Malling Address	Principal Office Address	3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
6300 STIRLING ROAD	6300 STIRLING ROAD	04/12/1994	
HOLLYWOOD FL 33024	HOLLYWOOD FL 33024	3a. Date of Last Report	\$500,990.00
		10/10/1996	5b. Amount of Capital Contributions in FLORIDA
0	100	4. State or Country of Formation	Contributions in FLORIDA to date:
2. Malling Address	28. Principal Office Address	FL	
Sulte, Apt. #, etc.	Sulte, Apt. #, etc.	6. FEI Number	
City & State	City & State	65-0487761	Applied For Not Applicable
	ony o state	7. Certificate of Status Desired	\$8.75 Additional Fee Regulred
Zip Country	Zip Countr		Fee Required State (See reverse side for fee information
		Ward Check payable to. Dept. 0	Totale (356 1976)36 Side to the introduction
9. Name and Address of Curren		10. If changed, new Register	ed Agent/Office
DORSKY, ERIC ESQ	Nami	9	
4430 SW 64TH AVE.		Address (P.O. Box Number Is Not Acceptable)	
DAVIE FL 33314	Suite	, Apt. #, etc.	
	City		Zip Code
10a. Pursuant to the provisions of sections 620 1051 and for the purpose of changing its registered office or agent. I am familiar with, and accept the obligation SIGNATURE (Registered Agent Accepting Appointment)	registered agent, or both, in the State of Florida. Suc s of section 620.192, Florida Statutes.	partnership organized or registered under the laws of the change was authorized by its general partner(s). I her	he State of Florida, submits this statemen eby accept the appointment of registered
A GENERAL PARTNER THAT		ED PARTNERSHIP OR OTHE	
11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Number	ers) 11b. City, State & Zip Code	11c. Registration/ Document Number
THE NEW MEYERS AIRPLANE COMP	6300 STIRLING RD.	HOLLYWOOD FL 33024	P94000019591
		100002 -10/0 *****	3161911 3/9701075016 341.25 ****541.25
Note: General partners MAY NOT			KWM

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on tis annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee powered to execute this report as required by chapter 620, Florida Statutes.

Typed or Printed Name of General Partner Signing Form MAX OSCEOLA